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NEW HAMPSHIRE
SECRETARY OF STATE

STATE OF NEW HAMPSHIRE
Statement of Receipts and Expenditures
 (RSA 664:6)
6-Month Report for CANDIDATES After
2004 General Election

I, DEBORAH A. ANNEN of 252 MAIN ST #5
(print name) (street)
HOPKINTON 03229, candidate for the office of GOVERNOR
(town/city zip code)

County of _____ District No. _____ for the DEMOCRATIC party,

And I, _____ fiscal agent, do submit the following report of
 receipts and expenditures.

SUMMARY OF RECEIPTS AND EXPENDITURES
6-MONTH REPORT AFTER 2004 GENERAL ELECTION

Date of Report: May 2, 2005 ☐ November 2, 2005 ☒

- | | |
|--|-------------------------|
| 1) Surplus or deficit brought forward
From General Election | 1) \$ <u>13,683.20</u> |
| 2) Total of all receipts since last report if a deficit
was brought forward from General Election | 2) \$ <u>23.00</u> |
| 3) Total of all expenditures since last report if a
surplus was brought forward from General Election | 3) \$ _____ |
| 4) Balance if SURPLUS | 4) \$+ <u>13,706.20</u> |
| 5) Balance if DEFICIT | 5) \$- _____ |

[Signature]
 Signature of Candidate

 Signature of Fiscal Agent

RSA 664:5, 7. Any candidate who has any outstanding debt, obligation, or surplus following the election shall file reports at least once every 6 months thereafter until the obligation or indebtedness is entirely satisfied or surplus deleted, at which time a final report shall be filed.

Secretary of State's Office, State House, Room 204, Concord, New Hampshire 03301
 Phone: 603-271-3242 -- Fax: 603-271-6316 -- <http://www.sos.nh.gov>
 email: elections@sos.state.nh.us

Candidate or Committee Name: Deborah A. Hansen

Reporting period ending Nov 2 2005

ITEMIZED RECEIPTS

Full Name of Contributor (Alphabetical Order)	Post Office Address	Amount of Contribution	Date Received	Aggregate* Contributions to Date	If contribution or aggregate contribution is over \$100 list: Occupation and Place of Business
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INTEREST ON MONEY MARKET ACCOUNT \$ 23.00

Total of receipts unitemized (\$25 or under) in this report \$ _____

ITEMIZED EXPENDITURES

Paid to Whom	Post Office Address	Amount of Expense	Date of Expense	***Indicate to which election expenditure applies		Nature of Expenditure
				***Primary/General		
				O	O	
				O	O	
				O	O	
				O	O	
				O	O	
				O	O	
				O	O	
				O	O	

*List occupation and place of business if total exceeds \$100 for primary or general election. RSA 664:6, I.